

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of Yuma

District of _____

Town of _____

or _____

City of Miami

BUREAU OF VITAL STATISTICS

ORIGINAL CERTIFICATE OF BIRTH

State Index No. 138

County Registrar No. _____

Local Registrar No. 719

2. Full name of child Francisca Hernandez (If birth occurred in a hospital or institution, give its NAME instead of street and number)

3. Sex of Child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other. _____ 5. No., in order of birth. _____ 6. Legitimate? Yes 7. Date of birth July 14, 1926 Month July Day 14 Year 1926

8. FATHER Full name Ramon Hernandez

9. Residence (Usual place of abode) Miami If non-resident, give place and state. Arizona

10. Color or race Mexican 11. Age at last birthday 28 (Years)

12. Birthplace (city or place) Chihuahua (State or country) Mexico

13. Occupation miner Nature of industry Copper mine

14. MOTHER Full maiden name Sebina Carpanas

15. Residence (Usual place of abode) Miami If non-resident, give place and state. Arizona

16. Color or race Mexican 17. Age at last birthday 19 (Years)

18. Birthplace (city or place) Sinaloa (State or country) Mexico

19. Occupation Housewife Nature of industry

20. Number of children of this mother 2 (Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living 2 (b) Born alive but now dead 0 (c) Stillborn _____ 21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was alive at 1:30 P. m. on the date above stated

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth. Signature Charles E. Irwin M.D. (Physician or midwife) Address Miami Arizona

Given name added from a supplemental report _____ Filed July 20, 26 19 26 Local Registrar.

Registrar

Filed _____, 19 _____

County Registrar.

689-714-232